

**Minutes of Meeting**  
**Health Services Council**  
**Project Review Committee-II**

**DATE: 19 October 2006**

**TIME: 2:30 PM**

**LOCATION: Health Policy Forum**

**ATTENDANCE:**

**Committee I: Present: Victoria Almeida, Esq., (Vice Chair), Raymond C. Coia, Maria Gil, Sen. Catherine Graziano, RN, Ph.D., Robert J. Quigley, DC, (Chair), Larry Ross, Reverend David Shire**

**Not Present: John Young**

**Excused Absence: Joseph V. Centofanti, M.D., John Keimig, Richard Lepine, Robert Ricci**

**Other Members: Present: Larry Ross**

**Staff: Valentina D. Adamova, Michael K. Dexter, Joseph G. Miller, Esq., Jennifer Morgan (Intern)**

**Public: (Attached)**

## **1. Call to Order, Approval of Minutes, Conflict of Interest Forms and Time Extension for the Minutes Availability**

**The meeting was called to order at 2:35 PM. The Chairman noted that conflict of interest forms are available to any member who may have a conflict. Minutes of the 17 August 2006 Project Review Committee-II meeting were approved as submitted. The chairman requested a motion for the extension of time for the availability of minutes pursuant to the Open Meetings Act. A motion was made, seconded and passed by six in favor and none opposed (6-0) that the availability of the minutes for this meeting be extended beyond the time frame provided for under the Open Meetings Act. Those members voting in favor were: Coia, Gil, Graziano, Quigley, Ross, Shire.**

## **2. General Order of Business**

**The first item on the agenda was the application of Newport Hospital for a Certificate of Need to establish a Diagnostic Imaging Center in Portsmouth to provide radiology services, including Digital Mammography, Ultrasound, CT and MRI services.**

**The applicant made a presentation and noted that the hospital is reaching capacity and per unit is the busiest in the state for MRI and second busiest for CT services.**

**Mr. Ross stated that this does not necessary demonstrate community need. There are three MRI scanners in Rhode Island within ten miles of the proposed site and another three in Massachusetts. There is no indication that people are being deprived of reasonable access to CT or MRI scans. There is a sense that there are more than enough or maybe even too many these types of facilities. We are all concerned about the affordability issue, the challenge by the Health Insurance Commissioner is to look at the affordability issue, the issue of imaging is certainly at the top of that list and Blue Cross is taking steps in that regard concerning its reimbursement, and is concerned about the number of facilities. He stated that he would be opposed to the application, given what already exists both in Rhode Island and in nearby Massachusetts and the reasonable access given the relatively short travel distance.**

**The Chairman noted that the Department is considering adding CT and MRI to the tertiary or specialty care list.**

**Mr. Ross stated that this reinforces the point. He noted that there haven't been any indications that people have to wait and can't get one within a few days. The letter from XRA stated that they've reduced their hours because the demand isn't there. He noted that he has not heard that the quality that exists today is inadequate and what the applicant is proposing is so superior that it changes the whole course of services that patients will be receiving.**

The applicant noted advantages of the proposed equipment. The applicant stated that although the number of slices of the CT scan does not affect the quality it does in fact affect the time frame of the scan. With regards to CT, for continuity of care reasons the applicant does not want to send patients to other facilities. Newport Hospital is at capacity for the CT and need a second unit. The center is being proposed in Portsmouth because the business comes from that service area and it would be more convenient to send a chunk of outpatients to Portsmouth to free up capacity on existing scanner. With regards to MRI, the applicant is proposing a 1.5 Tesla, while other units are 0.2 T and 0.6 T and several neurosurgeons and neurologists who will not send patients to those facilities because of the quality of the scan. For many reasons it is not a good option to send patients who come to the hospital receiving a scan that shows much more detail and then sending them to another facility where they will receive an inferior scan. If the proposal does not pass the hospital will see wait times dramatically increase into the double digits. Staff memo showed that demand will exceed capacity at some point although there are variations depending on what capacity is used.

In response to a question, the applicant stated that construction would take approximately a year. The facility would open in the winter of 2007 or early 2008. The MRI services will be offered in the fiscal year of 2009.

Staff asked why the delay in implementation of the MRI services relating to other imaging modalities. The Chairman asked if the proposal is so urgent, why is the applicant taking so much time to implement MRI services.

The applicant stated that based on their studies and estimates, it was towards the end of 2008 that there would be need. The applicant noted that staff's memo shows that the need for the additional MRI will not occur until the fiscal year 2009.

Mr. Ross noted the existing imaging modalities in nearby Massachusetts. He noted the issue of working collaboratively with existing providers and sharing information.

Dr. Robins, President of XRA Medical Imaging, stated that there are huge amounts of underutilization present at the XRA facility in Middletown. The MRI is being used at 40.75%, CT at 17.50%, Ultrasound at 29.20% and Mammography at 12.14%. Existing facilities in the state can more than accommodate for the capacity issues until 2009. He noted that he plans to upgrade to digital mammography at that facility. He discussed the quality of the CT and MRI equipment that already exists at the facility. He noted that the facility utilized the PACS systems used by the hospital and would be able to integrate the two systems to share information. He noted that Saturday and evening coverage is provided at his other facility but was curtailed in

**Middletown because of low volume.**

**Rev. Shire noted that the applicant is a community hospital whose mission is not-for-profit serving the community.**

**With regards to the questioning by the Committee on the implementation of MRI in 2009, the applicant stated that it may consider a condition of approval that prior to implementing the MRI service the issue of need be reviewed and reported back to the Committee. Dr. Robins noted that MRI's are replaced every five years and the whole landscape could be changed by the time this center is operational. Mr. Ross noted that the rate of increase has been dropping for imaging services.**

**A motion was made and seconded for the discussion purposes only to get a sense of the vote of the Committee. Mr. Ross noted his concern regarding need. Sen. Graziano noted concerns regarding increasing premiums and better utilization of existing equipment. Mr. Coia noted his concern about the MRI services and that he would be inclined to support the proposal if the MRI was not included. The motion and second were withdrawn and the discussion ended.**

**Ms. Almeida noted her concern with regards to a bankrupt healthcare system.**

**A motion was made, seconded and passed by a vote of four in favor,**

**two opposed and one abstention (4-2-1) to recommend that the application be denied. Those members voting in favor were: Almeida, Gil, Graziano, Ross. Opposed were: Coia, Shire. Quigley abstained.**

**There being no further business the meeting was adjourned at 3:45 PM.**

**Respectfully submitted,**

**Valentina D. Adamova**